



From the office of
Congressman Jim Himes

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The Affordable Health Care for America Act
Meeting the Health Care Needs of Senior Citizens

Medicare has been a stable, reliable program for senior citizens and people with disabilities for over four decades. Health reform is needed to rein in rising health costs for private and public programs alike. Improving and strengthening Medicare is a critical component of reform. The health reform bill will improve Medicare beneficiaries' access to quality, affordable health care.

- **Fills in the Part D Donut Hole:** Immediately begins to fill in the Medicare Part D donut hole to make prescription drugs more affordable. In 2010, seniors will see the donut hole reduced by \$500 and will have access to 50 percent discounts on brand-name drugs. The donut hole is completely phased out by 2019.
- **Enhances Preventive Coverage:** Eliminates copayments for preventive services in Medicare.
- **Helps Low-Income Seniors:** Improves low-income subsidy programs to ensure Medicare is affordable for seniors with low and modest incomes.
- **Combats Waste, Fraud & Abuse:** Ensures the program operates in the best interests of its beneficiaries and all taxpayers by expanding authority to fight waste, fraud and abuse.
- **Ends Medicare Advantage Overpayments:** Phases out overpayments to insurance companies offering private health plans in Medicare ("Medicare Advantage" plans) and adds additional consumer protections to ensure that these plans do not charge higher out-of-pocket expenses than traditional Medicare. Ensures that Medicare Advantage plans provide adequate value to their enrollees by guaranteeing minimum medical loss ratios.
- **Protects the Doctor-Patient Relationship and Improves Quality:** Companion legislation resolves a longstanding problem with the physician payment formula to promote primary care and advance innovation. Investments in health delivery system reform will improve coordinated care, promote efficiency, and enhance quality.
- **Extends the Medicare Trust Fund:** Following the advice of non-partisan experts at the Medicare Payment Advisory Commission, the proposal makes numerous changes in provider payments that extend the life of the Trust Fund for five years and put the program on stronger financial footing for the future